PTO/SR/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number UTILITY Attorney Docket No. 50623.325 PATENT APPLICATION First Inventor Yung-Ming Chen TRANSMITTAL Ethylene Vinyl Alcohol Composition And Coating Express Mail Label No. EV337979014US (Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) Commissioner for Patents APPLICATION ELEMENTS Mail Stop Patent Applications ADDRESS TO P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents Alexandria, VA 22313-1450 7 CD-ROM or CD-R in duplicate, large table or 1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2 🔲 Applicant claims small entity status 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🔯 a. Computer Readable Form (CRF) Specification 1Total Pages (preferred arrangement set forth below) Specification Sequence Listing on: - Descriptive title of the Invention i. ☐ CD-ROM or CD-R (2 copies); or
 ii. ☐ paper Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D Statements verifying identity of above copies - Reference to sequence listing, a table or a computer program listing appendix ACCOMPANYING APPLICATIONS PARTS - Background of the Invention - Brief Summary of the Invention 9. 🔯 Copy of Assignment Papers (cover sheet & Brief Description of the Drawings (if filed) document(s)) (3 pages) - Detailed Description 10. 37 C.F.R.§3.73(b) Statement Power of - Claim(s) (when there is an assignee) - Abstract of the Disclosure Attorney 11. English Translation Document (if applicable) Drawing(s) (35 U.S.C.113) [Total Sheets Copies of IDS 12. 🖂 Information Disclosure Statement (IDS)/PTO-1449 Citations a. Newly executed (original or copy) 13. 🖾 Preliminary Amendment (7 pages) b. Sopy from a prior application (37 CFR 1.63 (d)) 14 2 Return Receipt Postcards (MPEP 503) (for a continuation/divisional with Box 18 completed) (Should be specifically itemized) □ DELETION OF INVENTOR(S) 15. Certified Copy of Priority Document(s) Signed statement attached deleting inve (if foreign priority is claimed) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b) (b)(2)(B)(i). Applicant must attach form PTO/SB/35 6. Application Data Sheet. See 37 CFR 1.76 or its eduivalent 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76 ☐ Continuation □ Divisional Continuation-in-part (CIP) of prior application No: 09/750 655 Prior application information: Examiner: Henry S. Hu Group / Art Unit: 1713 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS or XI Correspondence address below ☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Cameron K. Kerrigan Name Squire, Sanders & Dempsey L.L.P. Address 1 Maritime Plaza, Suite 300 City San Francisco State CA Zip Code 94111

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will Virry depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sunt help's Chief Information Officer. U.S. Patert and Trademark Office, P.O. Box 1490, Alexandra, V.A. 2231-31450. DO NOT SEND FEES ON COMPLETED FORMS TO THIS ADDRESS. SEND TO. Commissioner for Patents, Mal Stop Patert Applications, P.O. Box 1450, Alexandria, VA 22313-1450

Registration No. (Attorney/Agent)

44.826

August 1, 2003

Date

ron K. Kerriga

Name (Print/Type)

Signature

	Approved for use through 04/30/2003. OMB 0651-003
	U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERC
Inder the Paperwork Reduction Act of 1995, no persons a	are required to respond to a collection of information unless it displays a valid OMB control number

FEE TO A NOBILTAL	Complete if Known					
FEE TRANSMITTAL	Application Number			New - Divisional of 09/750,655		
for FY 2003	Filing Date		Herewith			
10111 2000		First Named Inventor				
Effective 01/01/2003. Patent fees are subject to annual revision.				Yung-Ming Chen		
□ 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Examiner Name		Unassigned		
☐ Applicant claims small entity status. See 37 CFR 1.27		Art Unit		Unassigned		
TOTAL AMOUNT OF PAYMENT (\$) 750.00		Attorney Docket No.		50623,325		
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None	1	Entity	L FEES Small E	ntitu	100	
Order ☑ Deposit Account:						
Deposit	Fee Code	'Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account 07-1850	1051 /	130	2051	65	Surcharge - late filing fee or oath	
Number	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit	1053	130	1053	130	Non-English specification ,	-
Account Squire, Sanders & Dempsey L.L.P.	1812	2,520	1812	2,520	For filing a request for reexamination	
Name The Director is authorized to: (check all that apply)		920*	1804	920* ·	Requesting publication of SIR prior to Examiner action	
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application	1805	1,840	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(s) indicated below, except for the filling fee	1251	110	2251	55	Extension for reply within first month \cdot	
to the above-identified deposit account. :	1252	410	2252	205	Extension for reply within second month	
		930	2253	465	Extension for reply within third month	-
BASIC FILING FEE Large Entity Small Entity	1253 1254	1,450	2254	725	Extension for reply within fourth month	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month	
1001 750 2001 375 Utility filing fee 750 00	1401	320	2401	160	Notice of Appeal	
1002 330 2002 165 Design filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1003 520 2003 260 Plant filing fee	1403	280	2403	140	Request for oral hearing	
1004 750 2004 375 Reissue filing fee 1005 160 2005 80 Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
100 jo rionalone minigroe	1452 1453	110	2452	55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 750.00		1,300	2453	650	Petition to revive – unintentional	
2. EXTRA CLAIM FEES		1,300	2501	650	Utility issue fee (or reissue)	-
2. EXTRA CLAIM FEES Extra Fee from Fee	1502 1503	630	2502 2503	235 315	Design issue fee Plant issue fee	
Claims below Paid	1503	130	1460	130	Plant issue ree Petitions to the Commissioner	-
otal Claims 12 -20 = 0 X 18 = 0	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	-
ndependent 1 -3 = 0 X 84 = 0		-			Submission of Information Disclosure	-
Aultiple X 140 - 0	1806	180	1806	18Ç	Stmt Recording each patent assignment	-
Large Entity Small Entity		40	8021	40	per property (times number of properties)	
Fee Fee Fee Fee Code (\$) Fee Description	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18 2202 9 Claims in excess of 20 . 1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1203 280 2203 140 Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)	.]
1204 84 2204 42 **Reissue independent claims over original patent		900	1802	900	Request for expedited examination of a design application	
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent					or a design approarion	
. Over original parent	Other fee (specify)					
SUBTOTAL (2) (\$) 0	ł					
**or number previously paid, if greater, For Reissues, see above	*Redu	ced by B	asıc Filin	g Fee Pa	aid SUBTOTAL (3) (5) 0	
or number proviously paid, it greater, not neissues, see above	Ь			<u> </u>		
SUBMITTED BY					Complete (if applicable)	_

Name (Print/Type) 44,826 Telephone (415) 954-0200 Date August 1, 2003

WARNING: Information on this form may be complicable. Credit card information should not be included on this form, may be complicable. Credit card information should not be included on this form. Provide credit card information and authorisation on PTO-2018.

This collection of information is required by 37 CFR 1.7 and 77.7 The information is required to obtain or credit to obtain or complete, including patient properties of the patient place complete place including patient place or complete, including patient place or complete properties or complete place of the patient place place place of the patient place p